

The Role of Context, Culture, and Community Engagement

To Address Child Poverty in California
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Presented to
The Lifting Children and Families Out of Poverty
Task Force

Cheryl Tawede Grills, Ph.D.
Psychology Applied Research Center @ Loyola Marymount University

1 LMU Drive
Los Angeles, CA 90045

<http://bellarmine.lmu.edu/psychology/parc/>



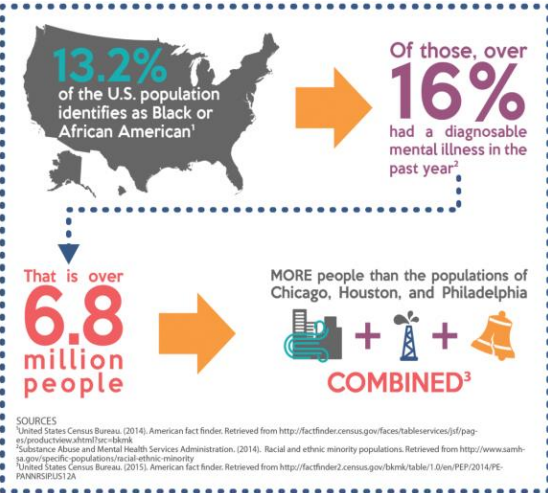
HEALTHY CITY/COMMUNITY (WHO)

- ❑ clean, safe physical environment of high quality (including housing quality);
- ❑ ecosystem that is stable now and sustainable in the long term;
- ❑ strong, mutually supportive and non-exploitative community;
- ❑ a high degree of participation in and control by the citizens over the decisions affecting their lives, health and well-being;
- ❑ meeting of basic needs (food, water, shelter, income, safety, work) for all the city's people;
- ❑ access by the people to a wide variety of experiences and resources, with the chance for a wide variety of contact, interaction and communication;
- ❑ a diverse, vital and innovative economy;
- ❑ connectedness with the past, with the cultural and biological heritage of city dwellers and with other groups and individuals;
- ❑ an optimum level of appropriate public health and sickness care services, accessible to all; and
- ❑ ***and freedom from Racism and Oppression***

The People's – The Community's History, Culture, Oppression, Resiliency, & Wisdom Matter



African Americans

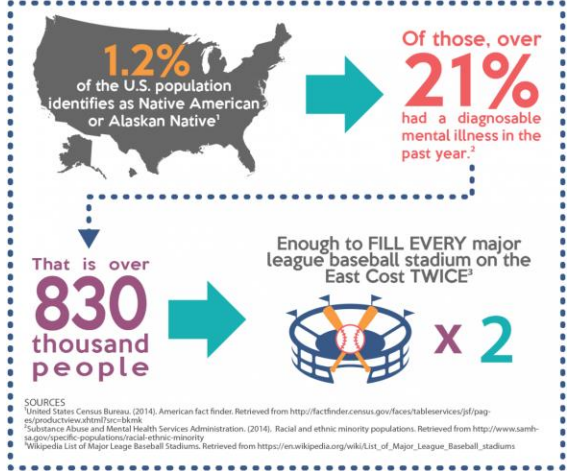


Latino/as



Racism and Historical Trauma

Native American



Asian/Pacific Islander



CULTURE

Culture provides the foundational frames for *developing worldviews, interpreting reality, and acting in the world* (Harrell, 2015).

Consider culture and how it influences an issue, a strategy, and its evaluation.

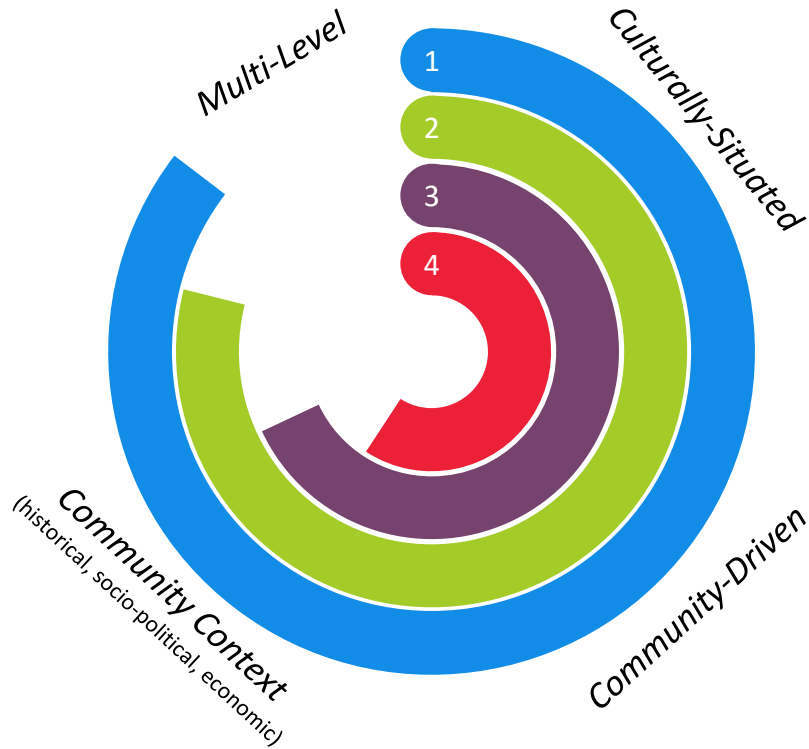
CULTURE

- emerges out of interpersonal realities
- is a dynamic relational process of shared meanings
- must be considered in historical, social, political, and economic contexts
- influences the experience, expression, course and outcome of mental health, substance use problems, help-seeking, poverty and the response to health promotion, prevention or policy strategies.



BEYOND CULTURAL COMPETENCE or CONSIDERATION

Critical need to consider culture and community at multiple levels in the design, implementation and evaluation of policies.



Cultural Competence: Cross definition:

“a set of congruent behaviors, attitudes, and policies that come together in a system, agency, or among professionals and enables that system, agency, or those professionals to work effectively in cross-cultural situations” (Cross et al et al, 1989, p. iv).

Multiple Levels:



Focus has mainly been on providers & ethnic groups

Structural Competency (Metzl, 2010, 2014)

Beyond the individual

Inequalities conceptualized in relation to the institutions and social conditions that determine resources



Structural competency = ability to discern how a host of issues (associated with individuals, individual behavior, and trends that count the number of individuals involved) also represent the downstream implications of a number of upstream decisions about matters related to health care, food delivery systems, zoning laws, urban and rural infrastructures, even our definition of poverty, health, and illness. (Metzl & Hansen, 2013)

Context and Justice Matter



Community Health & Well Being Matter



What does this have to do with lifting children and families out of poverty?

1. It's "easy" to miss something you're not looking for
2. We focus on (and make-meaning) based on what has or ***has not*** been "called-out"
3. Our implicit and explicit ways of thinking shape our practices and views about others who are "different" from us
4. Leading with racial equity and engaging in critical conversations to impact policy and practice is THE WORK

It's All Connected

- Food Justice
 - Access to Parks & Recreational Space
 - Clean water, air, and soil
 - Community safety
 - Hope & Efficacy
 - Connections with Neighbors
 - Valued Cultures and Identities
 - Transportation Justice
 - Reproductive Justice
 - Housing justice
 - Healthy marketing and retail environment
- Equitable Health Care Access
 - Community Infrastructure
 - Economic Justice
 - Educational Equity
 - Immigration Climate
 - Fair Justice System

Xavier Morales,
Ph.D., MRP, 2018
(Praxis Project)





Factor in the Social “Allostatic Load”

that may be consequent to causes of childhood poverty
for various CA ethnocultural communities

Allostatic load

Refers to the number of stressors that a person may experience, leading to recurrent arousal

Frequent activation of the flight-flight response has a cumulative effect that can result in long term damage to the **body**

e.g. Penny is a Year 12 student, she has a usual load of 5 subjects which is stressful enough, however she has just been informed to gain her scholarship she needs an average of 90% across her subjects. This pressure adds to her allostatic load

At the
community
level – --
long term
damage to
community
ethos/
norms/
stability

*Beyond fight/flight
Other stress
responses like
appeasement may
cause as much or
more harm*

Social “Allostatic Load”

- “The wear and tear on CA communities.”
- Particularly in low income communities of color
 - multigenerational, collective exposure to repeated or chronic stress, structural racism, and diminished quality of life.
- The social, cultural, ecological as well as physiological consequences of chronic exposure to fluctuating or heightened **destabilization** of under-resourced communities that results from chronic, multigenerational assaults
- (Laws, policies, practices and inequity can be assaults).
 - Even those that are well intentioned.

Through What Lens Will You



Community

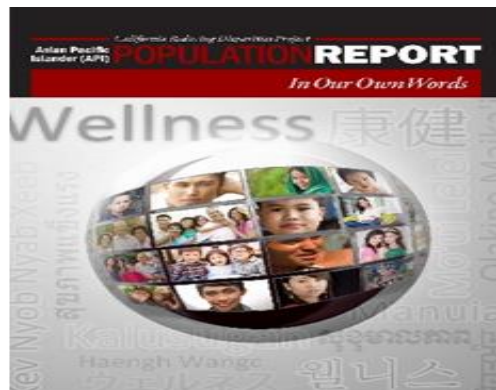
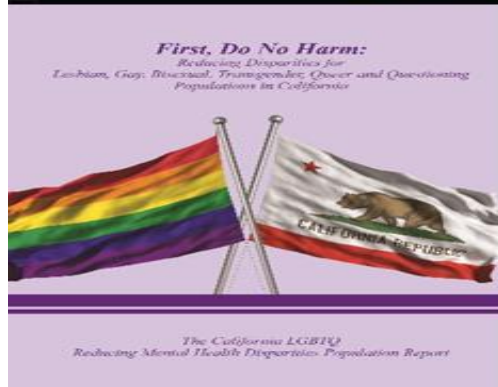
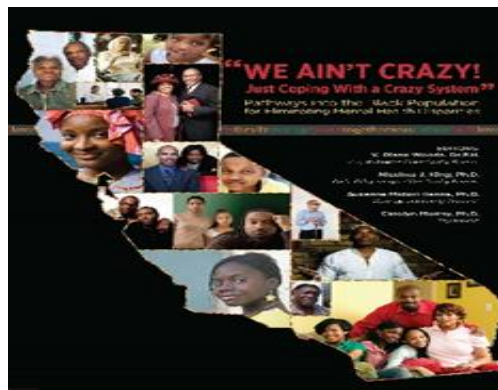
Implicit bias will surely raise its usual head!

What is the potential social allostatic load on different communities of your analyses and your recommendations?

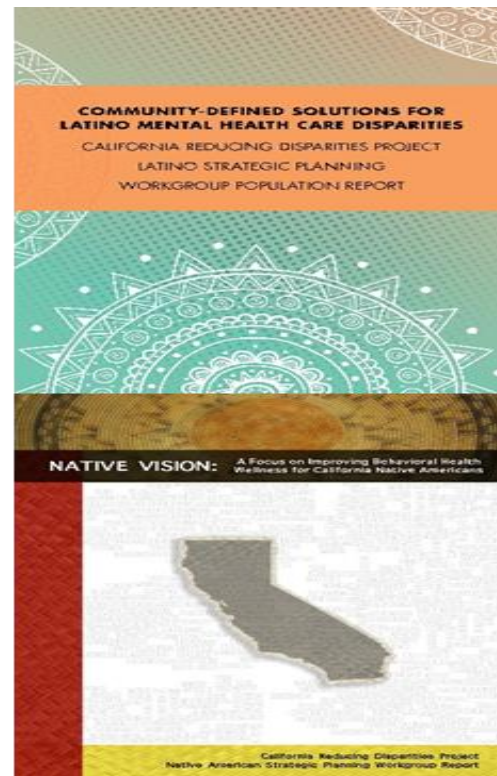
Community Voice Matters



CRDP Phase I Population Reports



California Reducing Disparities Project (CRDP) Population Reports



Community Based Participatory Practice

- Reflects a broader array of practices related to participatory activities which include and extend beyond research
- A set of principles for engagement and participation—typically between communities and entities external to the community (e.g., government agencies such as County Departments of Mental Health, policy makers such as elected officials, institutions, researchers/program evaluators).
- Inspires attention to culture, context, trust-building, shared meaning, consensus, and equity

Community Organizing (with, not for or to)

- A process by which people are brought together to act in common self-interest and in the pursuit of a common agenda.
 - build a base of concerned people
 - popular education
 - mobilize community members to act
 - develop leadership from and relationships among the people involved
 - seek accountability from elected officials, and institutions
 - increased direct representation within decision-making bodies and social reform.

Levels of Community Involvement

Balancing Commitment

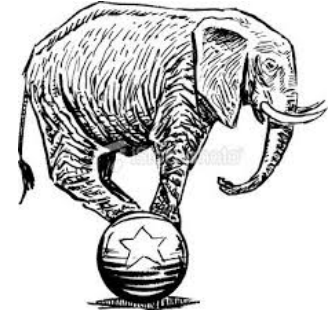
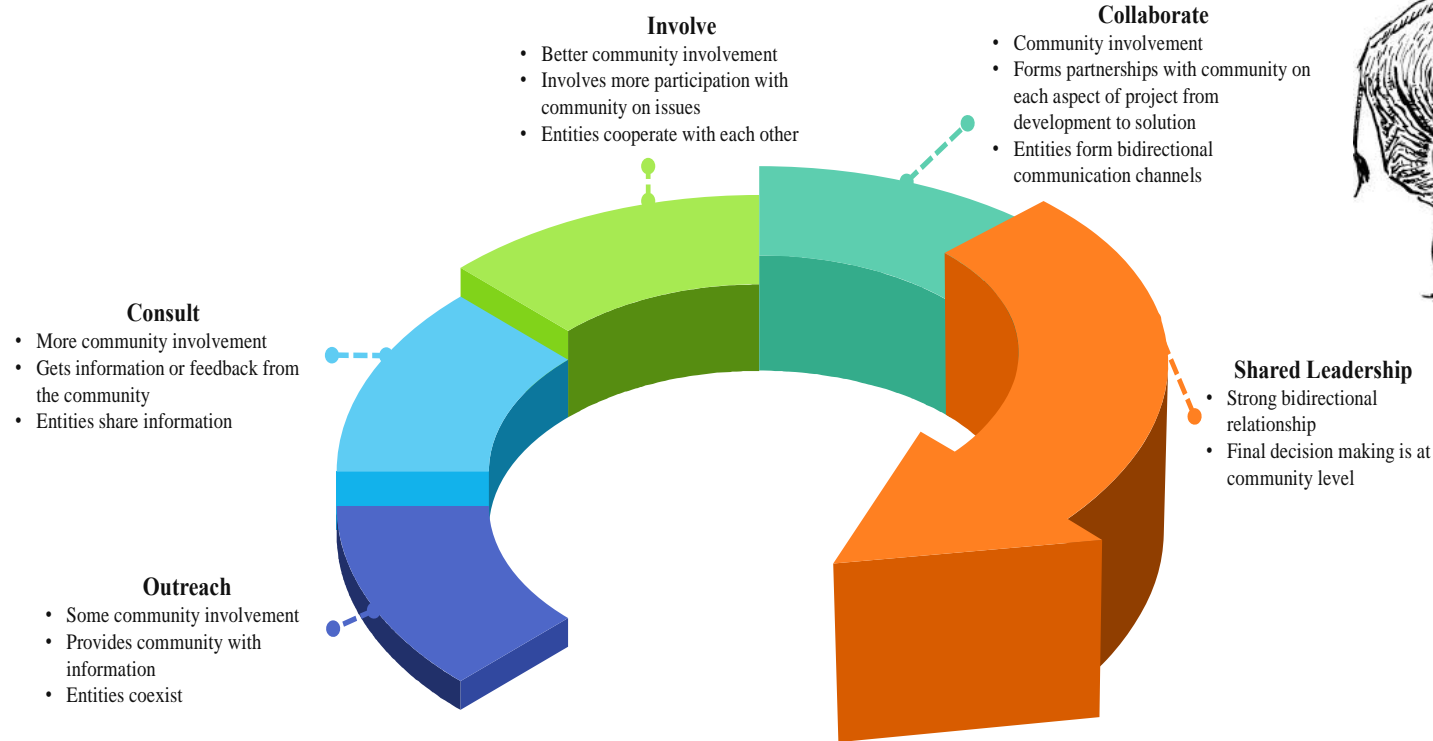


Figure 1. Adapted from NIH, 2011



Community Based Participatory Practice

Why do it?? *It's a door into cultural humility ...*

"...a lifelong commitment to self-evaluation and critique, to recognizing power imbalances, and developing mutually beneficial partnerships with community"

Case Examples from Mental Health and Public Health

And Valuable Lessons Learned



Strategy and Approach is Determined by Culture and Context

Develop Alternative (Indigenous) Poverty Reduction Strategies



Builds and Maintains Trust & Facilitates Community Stakeholder Buy-In



Facilitates Capacity Building & Sustainability



Enhances Relevance and Use of Data by All Partners (→ direct resources & influence systems/policy change)

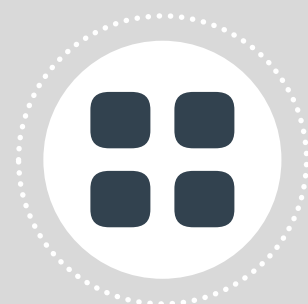
Bridges Differences in Discourse (language, understanding) **Between Funders/Academia, Decision Makers & Community**



Promotes External Validity & Expands the Evidence Base



Improves Outcomes & Health & Well-being of Communities (directly and indirectly)

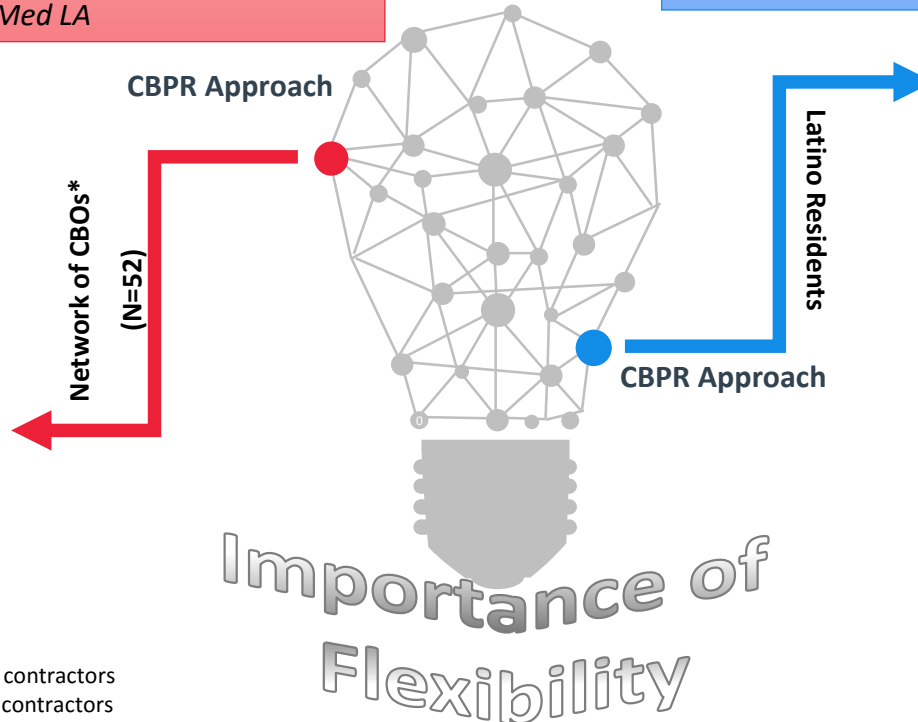


The Community Centered Emergency Room Project (CCERP): Needs Assessment on Prescription and OTC Use

*Funder driven county-wide process lead by LA County
Department of Public Health's Substance Abuse
Prevention and Control
& Safe Med LA*

*Community- driven local process lead by
CCERP and
Resident Leaders*

- LA County-wide quantitative community assessment (youth, adults) on risk, availability/accessibility, consumption, and reasons why people use prescription medications non-medically to assist with planning efforts county-wide



- Qualitative approach (focus group in Spanish) with residents to assess the role of culture and context related to risk, availability/accessibility, consumption, and reasons why people use prescription medications non-medically to design culturally responsive prevention strategies for Boyle Heights community

*Environmental Prevention Services (EPS) contractors
Comprehensive Prevention Services (CPS) contractors

(CCERP): Prescription and OTC Use in a Latino Community

What was revealed using this CBPR Approach?

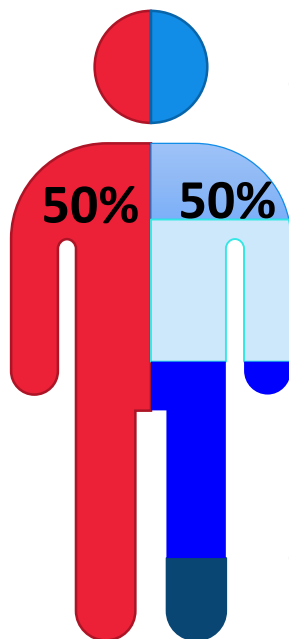
County-Wide Findings TBD
(data collection is ongoing)

Sample Question:

How do you think young people/adults typically get prescription medications?
[Check up to five that you think are most common sources]

- ☐ From home (medicine cabinets, other storage places)
- ☐ From friends or peers at school
- ☐ From family members (siblings other relatives)
- ☐ From people around the neighborhood who write false prescriptions
- ☐ From local retail stores or pharmacies
- ☐ From doctors who over prescribe
- ☐ Illegally (from dealers)
- ☐ Internet
- ☐ Other sources (please describe):
- ☐ Don't know

CCERP Findings: Contextual factors & cultural beliefs/practices emerged that will shape CCERP's prevention strategy & subsequent data collection strategies.



Self-prescribing or “sharing” meds due to lack of health insurance & access to affordable health care, including high cost of prescription drugs

Easy access to Mexican medication from local stores or trips to-and-from Mexico that residents are more familiar with and comfortable taking

Belief that Mexican medicine in general (including prescription drugs) is more effective than US medicine

Lack of awareness and information of proper use and dangers about misuse (e.g., not following dosage instructions as directed by doctor/physician)

“People sometimes don’t even have money to go to a doctor visit. Right now it’s more expensive to go to the appointment, the appointment is more expensive than the medicine they are going to give you. And that’s why sometimes people don’t go, because the truth is there is no way to go to a doctor and **it is easier to go and bring medicine [from Mexico] that you know.**”

“[local store] here on Cesar Chavez...and they sell Mexican medicine. Then that one is also very famous they have been there for many years—I go there.”

“I think that it is also accessible **to get the medicine without prescription with family members that can go to Tijuana** for example, and they bring the penicillin or other things that we need from there...sometimes it is cheaper to pay the Mexican price.”

“We **grew-up with Mexican parents and they don’t believe in American medicine.** They think that the Mexican medicine is more productive, more effective than the American medicine, [which] is nothing more than a syrup, it is sweet water. And Mexico’s medicine is effective within a day or two.”

“I use bedoyecta (B12 injections) a lot and they sell it here, but I always order it from Mexico. Obviously, I cannot go to Mexico, but I ask people to bring it back here to me and I do not know why, but I trust it more.”

“We **don’t finish them [prescription medication]** and they told me to take it for ten days. In five days, **I feel a little better and I stop taking it.**”

The Community Coalition, South LA

When the Community Drives the Inquiry....what emerges? An African American & Latino Community Discovery

CDC REACH

Community survey
allows the
community voice
to emerge

Subsequent CBPR
**MAPPING
PROCESSES**
sharpened our
focus in 2
neighborhoods

*Can we verify the
community
perceptions using
administrative data?*

Crime data confirmed
the patterns that the
community had
identified.

”

Focus groups

provided more
nuance on the
problems with
smoke shops
(traffic safety,
drug use, crime &
prostitution in
and around
smoke shops)

SLA wide Youth and Resident Poll

(n=4,223): Smoke
shops differences
by zip code



As a result, the Coalition more
intentionally started querying the
community about smoke shops to
inform campaigns related to
community safety and
substance abuse prevention.



As the community
was asked to
identify the “hot
spots”

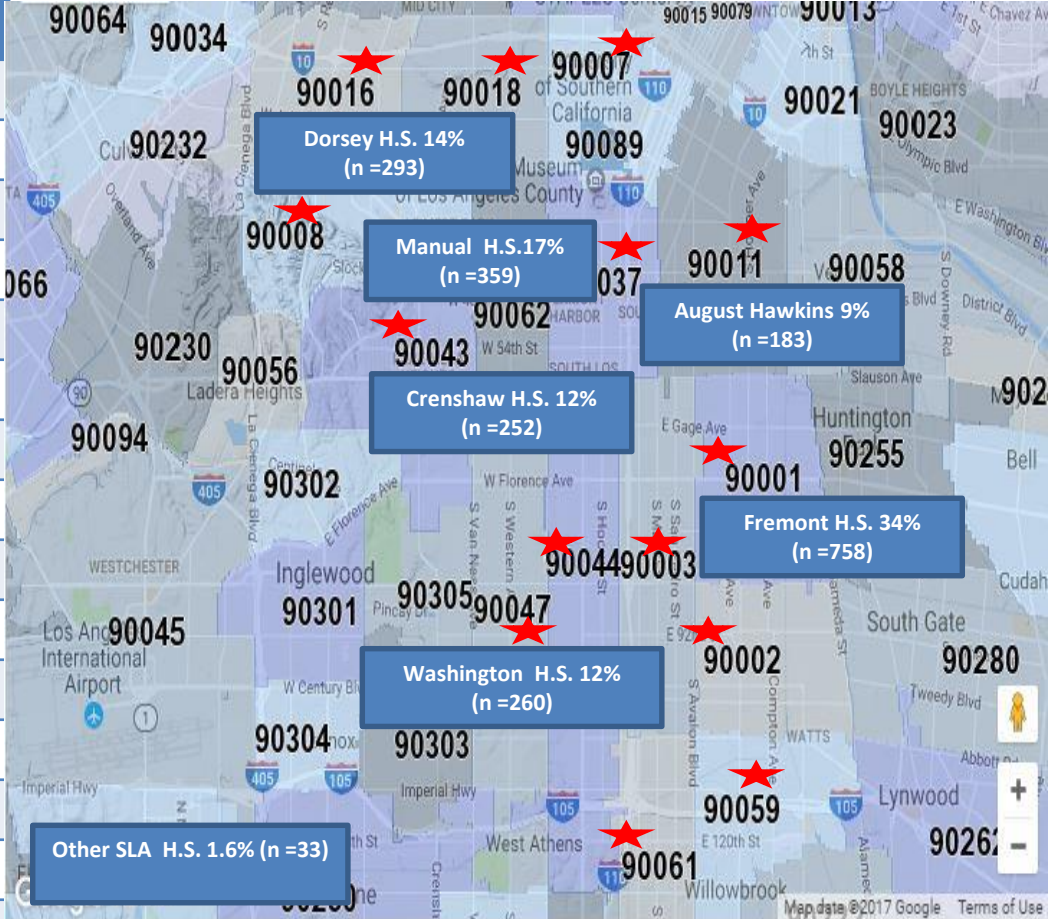
The more critical
issue emerged
SMOKE SHOPS

The survey
yielded one
perception of
issues: Equal
concern
across
problem areas

The 2017 South Los Angeles People’s Poll Sample Size (N =4,136)

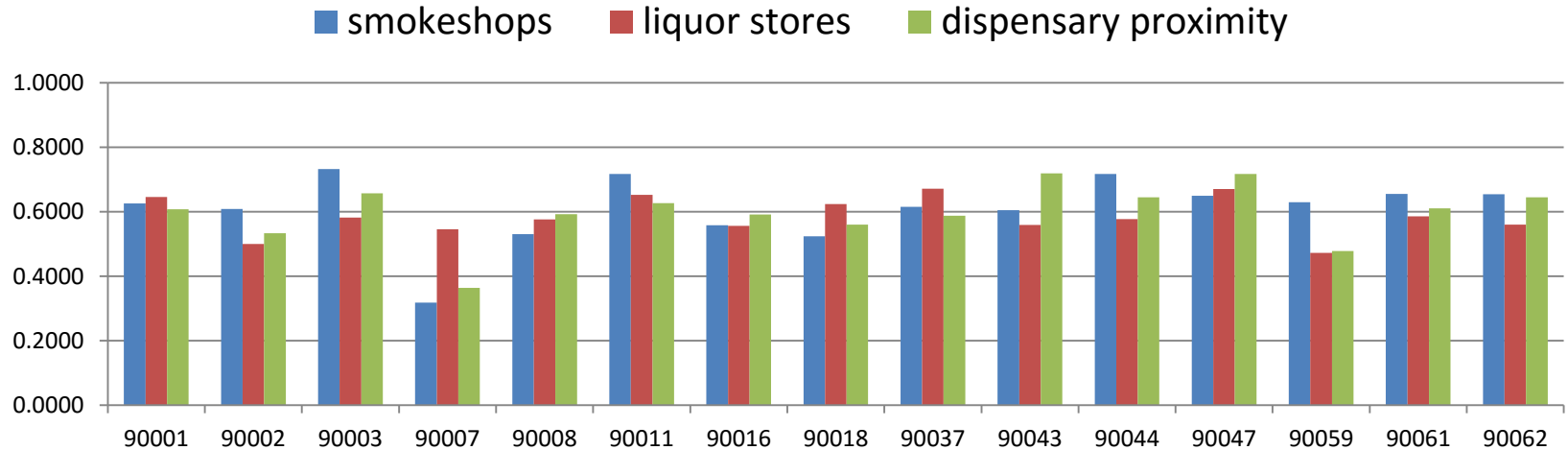
Percent Completed Polls by Zip Code and High School

Zip Code	N	Percent
90001	112	6%
90002	146	8%
90003	211	11%
90007	22	1%
90008	101	5%
90011	117	6%
90016	45	2%
90018	109	5%
90037	143	7%
90043	206	10%
90044	278	14%
90047	196	10%
90059	90	5%
90061	113	6%
90062	196	10%



Resident Concerns by ZIP Code

Smoke Shops, Liquor Stores, Dispensaries



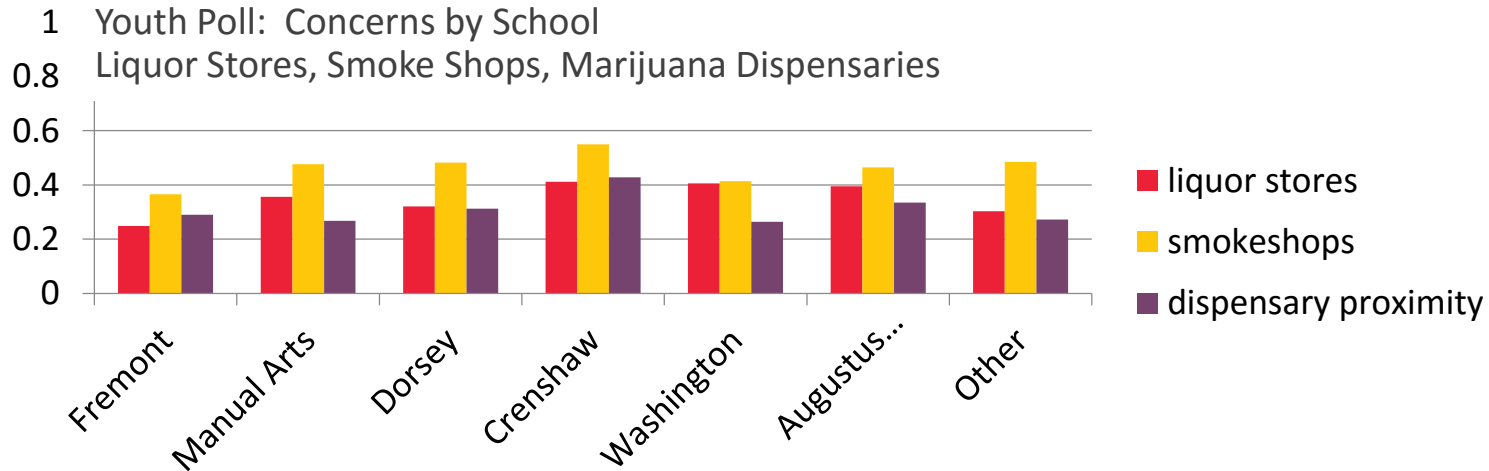
For 7 of 15 ZIPs, smoke shops have largest fraction of “very concerned”

For 4 of 15 ZIPs, liquor stores have largest fraction of “very concerned”

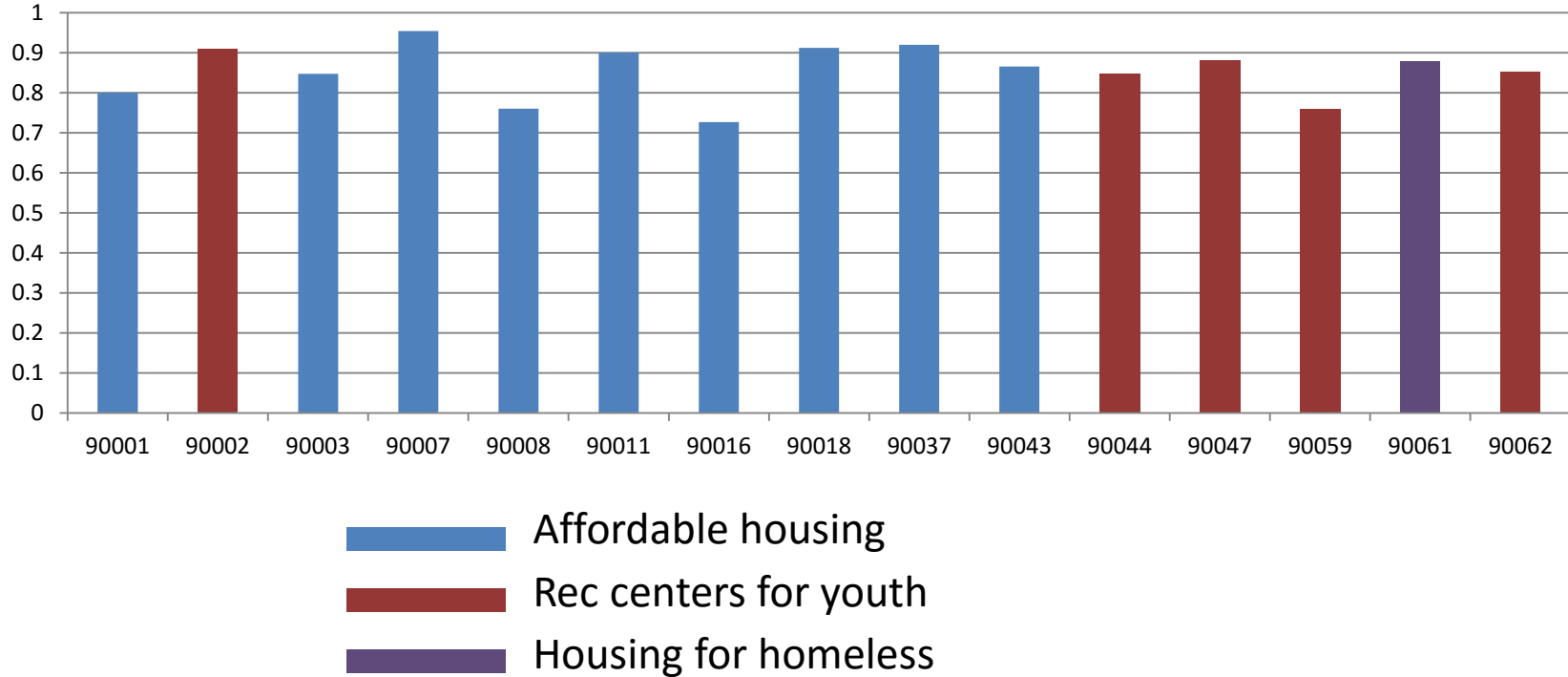
For 4 of 15 ZIPs, dispensary proximity has largest fraction of “very concerned”

Further Insights Youth Prevention

“Entire strip malls will be filled with smoke shops and dispensaries and each one will have *“a different angle in how to get you in their shops.”* For example, smoke shops and dispensaries are advertising with cartoons like Sesame Street and cookie monster.”



By Zip Codes: Residents → Spend Public \$ First On



For **9** of 15 ZIPs, **affordable housing** is top priority

Top two “asks” over 70% across the board responding “spend here first”!

In 90011, every “ask” has 80%+ responding “spend here first”!

COMUNIDADES CREANDO
AMBIENTES SALUDABLES

CCHE *puede!*



COMMUNITIES CREATING
HEALTHY ENVIRONMENTS

Improving Access to Healthy Foods and Safe Places to Play in Communities of Color



Your ZIP CODE is more important than your genetic code
for life expectancy
The intersection of health, place and equity.

RWJF: CCHE IS ABOUT A CULTURE OF HEALTH

- Physical/mental health and broader indicators of community well-being (e.g., social, economic, education) are intertwined
 - (Across generations for COC this was/is understood)
- Changing the narrative around what “counts” as public health work and who is doing public health work
 - (A hidden reality across generations of COC)
- Moving from disparities → equity focus

→ JUSTICE

CHINESE PROGRESSIVE ASSOCIATION

SAN FRANCISCO, CA

“One of the ways we think about addressing childhood obesity or childhood health, is [focusing] more on movement building...**everything connects to everything**. You can't just pretend and [say to the community], 'We're not talking about Black and Asian tensions right now; we're here to talk about health.' Gentrification is [also] unhealthy. Wage theft is [also] unhealthy...I mean these are all really unhealthy things, but we think of health sometimes in a very narrow way. **If you have a movement building framework, you can see everything is connected...**But I think **there's kind of a transformational approach that's needed because without that you end up siloing the movement.**”

Community Snapshots - Interventions Defined By the Community Grounded in Community Context

Asian Pacific Environmental Network (APEN) – Oakland & Richmond, CA

SNAPSHOT

Overview

Since 1993, Asian Pacific Environmental Network seeks to empower low-income Asian and Pacific Islander communities to achieve environmental and social justice.

Mission

"All people have a right to a clean and healthy environment in which their communities can live, work, learn, play and thrive. Towards this vision, APEN brings together a collective voice to develop an alternative agenda for environmental, social and economic justice. Through building an organized movement, we strive to bring fundamental changes to economic and social institutions that will prioritize public good over profits and promote the right of every person to a decent, safe, affordable quality of life, and the right to participate in decisions affecting our lives. APEN holds this vision of environmental justice for all people. Our work focuses on Asian and Pacific Islander communities." –APEN website



Constituency

- Asian & Pacific Islander
- Ages 15-65+
- Relative Caregivers
- Immigrants
- Undocumented
- Formerly Incarcerated

Local Conditions & Critical Issues Impacting 0-5 Childhood Health in Oakland

Forced displacement due to gentrification

Including unaffordable housing, rising rents, evictions and displacement due to immigration status.

Lack of access to quality jobs in the community

Lack of access to community health care

Nollie Jenkins Family Center, Inc. (NJFC) – Durant (Holmes County), MS

SNAPSHOT

Overview

NJFC visualizes an energized and involved community where all people, young and old, are valued, nurtured and supported as we work together to build and sustain communities that are purposeful in ensuring that the environmental, political, cultural, recreational, educational, economic, and spiritual needs of its citizens are actualized and preserved.

Mission

NJFC's mission is to empower the citizens of the community by developing and supporting grassroots leaders, community organizers, parents, students, and members of the African American community, as well as community-based organizations so that they have the necessary tools/skills of community organizing, advocacy, and activism to increase family engagement, build for meaningful social change, effectively impact local and state policy, family and governance structures; and build stronger/sustainable organizations and communities.



Constituency

- African Americans (all ages)
- LGBTQ+ youth & young adults
- Homeless
- Disabled
- Formerly incarcerated
- Court-involved youth
- Black & brown girls/women
- Families exposed to domestic & family violence

Local Conditions & Critical Issues Impacting 0-5 Childhood Health in Durant

Access to Quality Education for their Children

"The Mississippi Delta is identified as a critical teacher shortage area. Meaning that 10% or more of the teachers are ready for retirement and/or most teachers are teaching out of their content area, and/or we do not have teachers who are licensed and certified in the critical content areas for example science, math, and serving children with disabilities." Only twice in the history of

DO OUR METRICS MARK TRANSACTIONS OR TRANSFORMATIONS?

CCHE 1: Black New Orleans



CCHE 1: White New Orleans

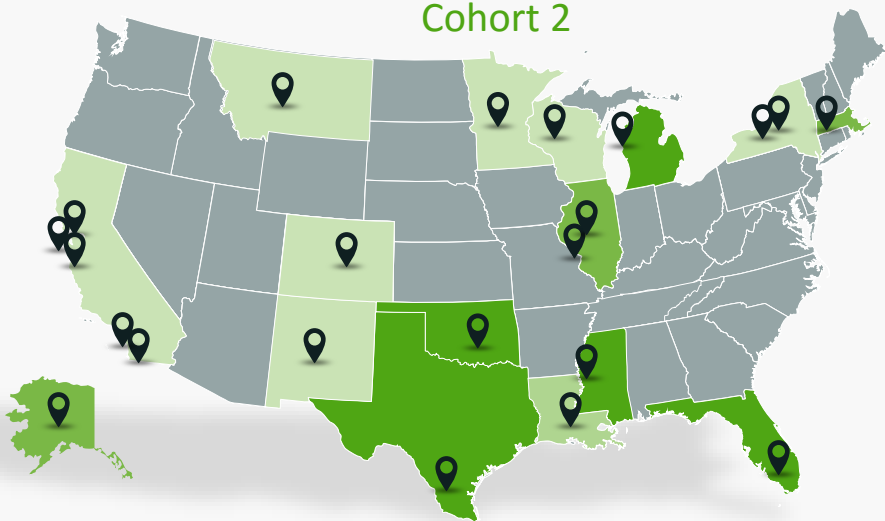


10grantees
Cohort 1

12grantees
Cohort 2

CCHE 1

Grantee Phase: Childhood Obesity Prevention



Funded by the Robert Wood Johnson Foundation, The Praxis Project served as the national program office for CCHE. Twenty-two community-based organizations and tribal groups were supported in the development and implementation of culturally competent community engagement and policy initiatives to address childhood obesity at the local level.

CCHE Proposed Policy Campaigns

68%
n=18



INCREASE
ACCESS

TO NUTRITIOUS &
AFFORDABLE FOOD



INCREASE
ACCESS

TO SAFE PLACES
TO PLAY

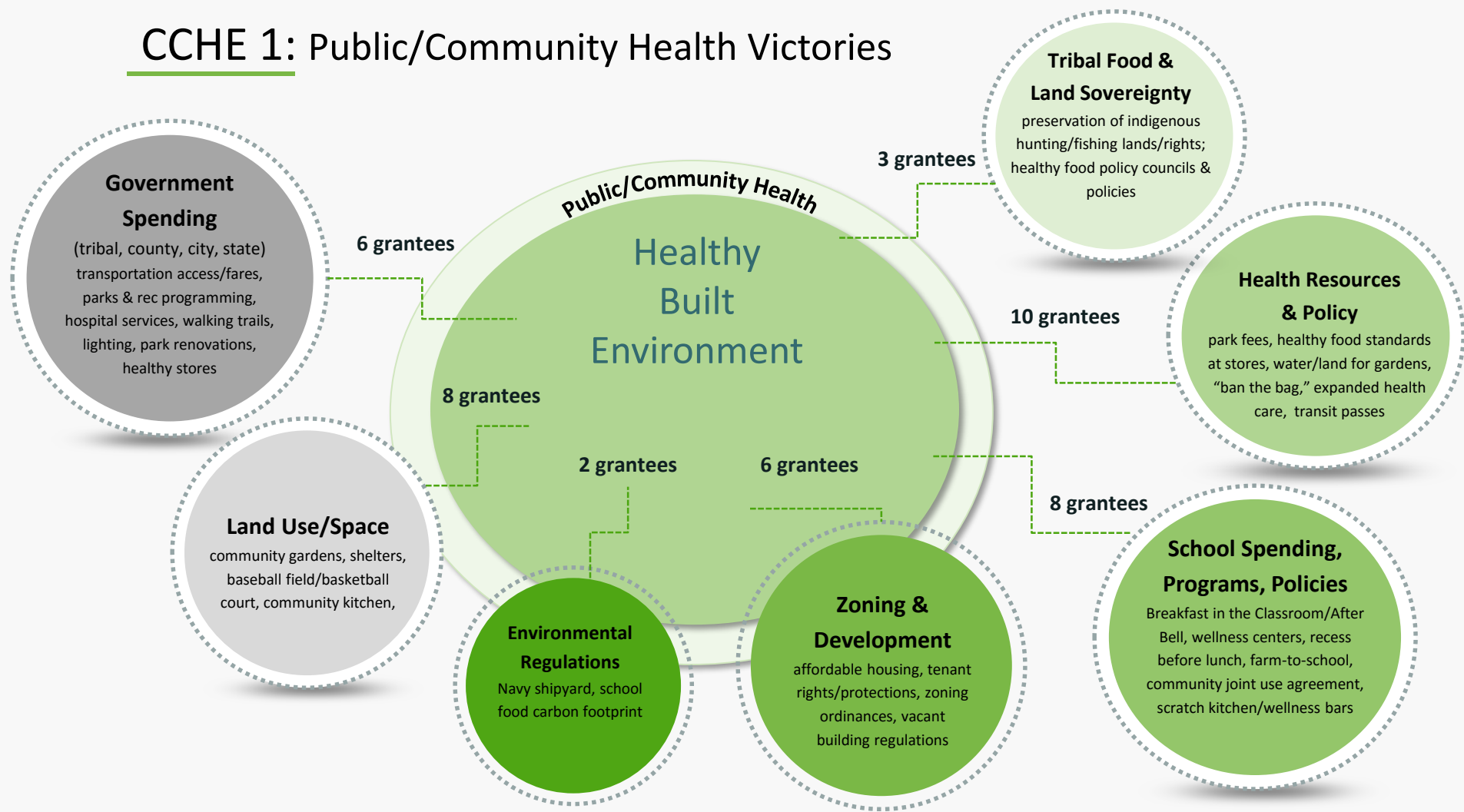
88%
n=15

A total of 72 total policy victories were
obtained by CCHE 1 grantees



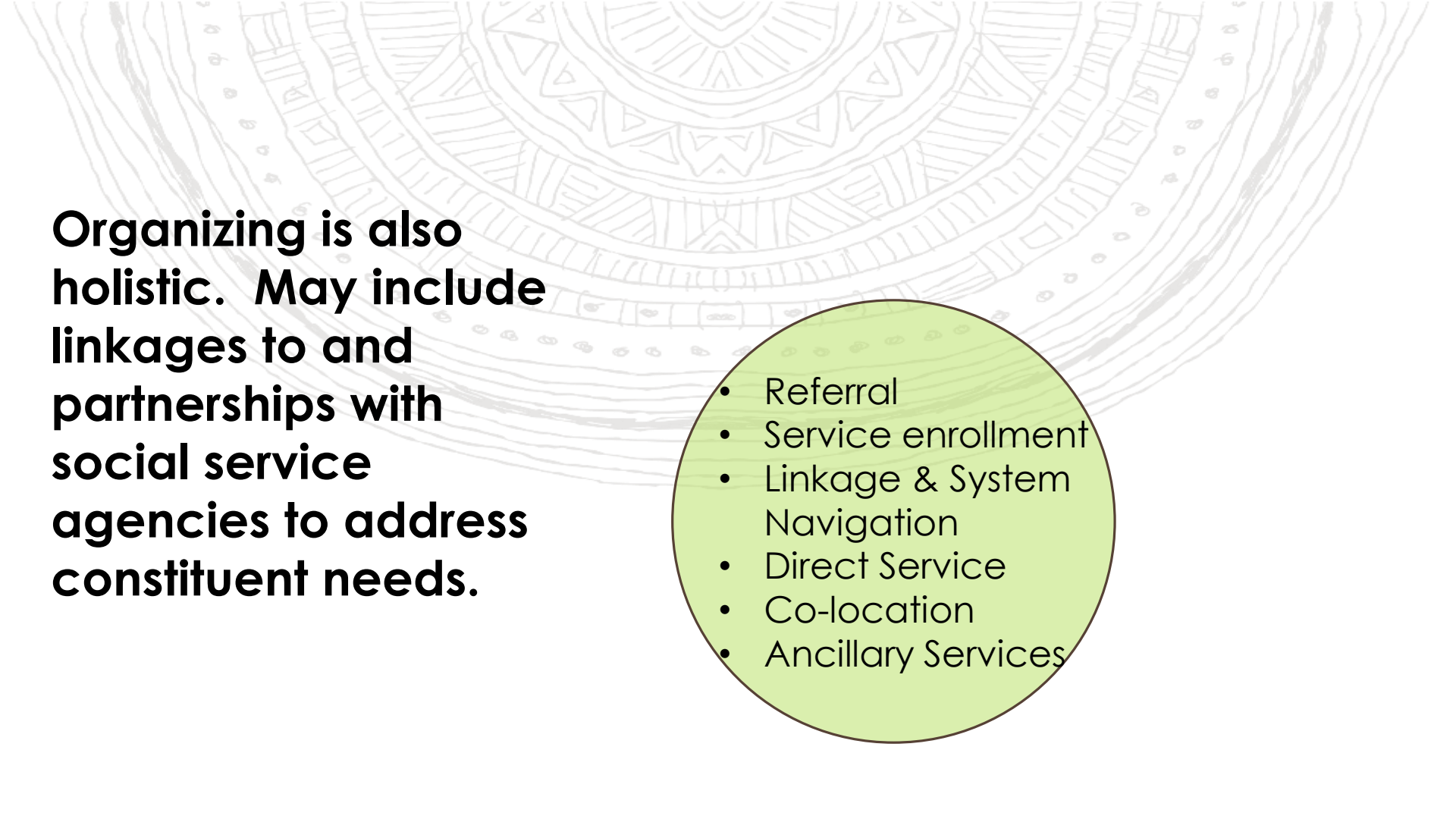
22 grantees represented 4 major racial/ethnic groups: African American, Asian & Pacific Islanders, Latino/a, and Indian Country located in 16 cities and indigenous nations.

CCHE 1: Public/Community Health Victories



Black Organizing Project Oakland, CA

“When families are part of changing the policies, it changes everyone. If mom feels like she knows how to advocate for these issues, and children are part of that and they see that, they don’t feel like they are just helpless and powerless in the system. Part of having **intergenerational** space is creating opportunities to hear what [children and youth] think, what kind of things makes them feel good and what kind of a leaders they want to be...**doing organizing that includes everybody is important.**”



Organizing is also holistic. May include linkages to and partnerships with social service agencies to address constituent needs.

- Referral
- Service enrollment
- Linkage & System Navigation
- Direct Service
- Co-location
- Ancillary Services

Resilience O.C. Santa Ana, CA

“We really wanted to focus on **a framework where both those models could co-exist [service provision and organizing/policy campaigns]** in order to really build transformative youth leadership...that has been a strength. Yes they know how to take notes, how to facilitate a meeting. But they also know what social and emotional health is, and what trauma informed practices are...so that the youth don't get overwhelmed, don't get thrown into an organizing culture that then burns them out. ”

CBPP: It's a Journey...Not a Destination



Final Food For Thought for the Journey

01

Are the right community members at the table? This needs to be reassessed periodically as the “right” community members might change over time. Community Organizing Important here.

How are community members involved in developing strategies and goals? How did community members help ensure that they are culturally aligned?

02

03

How are community members involved in evaluation or data analysis? Did they help interpret or synthesize conclusions?

How can systems and decision makers employ CBPP to advance policy and praxis to truly reflect the lived experience of different communities? Moving beyond one size fits all.

04

Thank You

Psychology Applied Research Center @ Loyola Marymount University
1 LMU Drive
Los Angeles, CA 90045
<http://bellarmine.lmu.edu/psychology/parc/>

